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PTO/SB/22 (12-04)
Approved for use through 7/31/2006. OMB 0651-0031
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PETITION FOR EXTENSION (Fees pursuant to the Consol	Docket Number (Optional) 270142000300						
Application Number	09/530,795	Filed November 5, 1998 (Int'l)					
For ENHANCED INFANT AGENTS	FORMULA CONTAININ	NG LIPOSOME EN	CAPSULATED NUTI	RIENTS AND			
Art Unit 1761			Examiner	K. Hendricks			
This is a request under the plantified application.  The requested extension an				-			
The requestion extension en	0.100 10.00 10.10.10.10	_		ophiate ice below).			
One month (37	CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	\$			
Two months (37	CFR 1.17(a)(2))	\$450	\$225	<b>s</b>			
Three months (	S1020	\$510	\$				
Four months (3'	\$15 <del>9</del> 0	\$795	\$				
X Five months (37	\$2160	\$1080	\$ 1,080.00				
Payment by credit ca	nt of the fee is enclosed.  rd. Form PTO-2038 is a ady been authorized to charge a ober 03-1952	charge fees in this a ny fees which may Have-enclose	be required, or credi d-a duplicate-copy of m (PTO/SB/17) is att	any overpayment, t			
I am the applicant/Inventor.							
L	nee of record of the entire latement under 37 CFR ( ley or agent of record. R	3.73(b) is enclosed	. (Form PTO/SB/96)				
	ey or agent under 37 CF		44,957	·			
The state of the s			May 31, 2005				
Signature  James J. Mullen III, Ph.D.			Date (05%) To a To an				
- Jam Ty	(858) 720-7940 Telephone Number						
NOTE: Signatures of all the Invention one signature is required, see	ore or assignees of record of the oblow.	enlire intereal or their repre					
X Total of	1 forms are submit	red.					

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Effective on 12/08/2004.  Rees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2005				respond to a collection of information unless it displays a valid OMB control number Complete if Known									
				Application Number 09/530,795									
				Filing Date N			November 5, 1998 (Int'l)						
				First Named Inventor			Brian C. KELLER						
							K. Hendricks						
X Applicant claims small entity status. See 97 CFR 1.27				ACOIN .			1761						
TOTAL AMOUNT OF P	Attorney Docket No. 2701420003				0								
METHOD OF PAYMENT (check all that apply)													
Check Credit Card Money Order None Other (please identify):													
X Deposit Account o	epoeli Account Numbe	<u>, 03-1952</u> c	Deposit Acc	count Name;		M	orrison & Foers	ter LLP					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
X Charge fee	(a) indicated belo	w		Γ	Charg	e fee(s) ir	rdicated below, e	ecept for t	he filing fee				
X Charge any additional fee(a) or underpayment of fee(s) under 37 CFR 1.16 and 1.17													
FEE CALCULATION		JRJ 1.17											
1. BASIC FILING, SEAR		NATION FE	ES										
	FILING	FEES		ARCH F		EXAMI	NATION FEES						
Application Type	<u> </u>	Fee (\$)	Fee (\$		l Entity e (\$)	Fee (\$)	Small Entity Fee (5)	Fees !	Paid (\$)				
Utility	300	150	500		50	200	100	0.00					
Design	200	100	100	_	50	130	65	0.00					
Plant	200	100	300	1	50	160	80	0.00					
Reissue	300	150	500	2	50	600	300	0.00					
Provisional	200	100	0		0	0	0	0	0.00				
2. EXCESS CLAIM FEE	5								Small Entity				
Fee Description  Bach claim over 20 (including Reissues)							Fee (\$) 50	Fee (\$) 25					
Each independent claim over 3 (including Reissues)							200	100					
Multiple dependent clair	ns							360	180				
Total Claims Ext	ra Claima Fe	<u>:e (S).</u>		Paid (S) Multiple Deper				<u>dent Claims</u>					
-20=	×	= -		700		£	ee (\$)	Fee Paid (\$)					
Indep. Claima Ext	ra Claims Fe	/E\	Eco I	Paid (\$)		_		0.00					
-3=	X X	<del>18 (\$)</del> = _		0.00	_								
3. APPLICATION SIZE													
If the specification and													
listings under 37 CF sheets or fraction the							entity) for each a	dditional 5	0				
Total Sheets	Extra_Sheets	Number	of each a	<u>idditional</u>	60 or ira	ction there	eet <u>Fee (\$)</u>		Pald (\$)				
· 100 =		50		(conveg at	to a wh	ole number	)×	<del></del>	0.00				
4. OTHER FEE(S)								<u>Fees Paid (\$)</u> 0.00					
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge); 2255 Extension for response within fifth month								1,080.00					
Other (e.g., rate rining surcharge): 2401 Notice of appeal 250.00													
SUBMITTED BY	T XX	1/11											
Signature	5-XY/7	71/1=	7	Registration (Altomoyi A		44,957	7 Telephone	(858) 720-7940					
Name (Priper Type) James	J. Mydlen III, Pi	h.D.					Date	May 31	, 2005				
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